

IV. PARTIES, REPRESENTATION, PLACEMENT, AND MORE

	Child 1	Child 2	Child 3	Child 4
Child's name and representation:	Name GAL CASA	Name GAL CASA	Name GAL CASA	Name GAL CASA
Child's DOB	____/____/____	____/____/____	____/____/____	____/____/____
Name and representation of child's mother(s) <input type="checkbox"/> <i>Circled mother(s) in custody at</i>	Name Atty	Name Atty	Name Atty	Name Atty
Name and representation of child's father <input type="checkbox"/> <i>Circled father(s) in custody at</i>	Legal fa Atty	Legal fa Atty	Legal fa Atty	Legal fa Atty
	Presumed fa(s) Atty	Presumed fa(s) Atty	Presumed fa(s) Atty	Presumed fa(s) Atty
	Alleged fa(s)	Alleged fa(s)	Alleged fa(s)	Alleged fa(s)
	Atty(s)	Atty(s)	Atty(s)	Atty(s)
Name and representation of child's legal guardian/legal custodian/other <input type="checkbox"/> <i>Circled LG/LC/other in custody at</i>	Name Atty	Name Atty	Name Atty	Name Atty
Legal custody with	<input type="checkbox"/> mother <input type="checkbox"/> father <input type="checkbox"/> DHS <input type="checkbox"/> other	<input type="checkbox"/> mother <input type="checkbox"/> father <input type="checkbox"/> DHS <input type="checkbox"/> other	<input type="checkbox"/> mother <input type="checkbox"/> father <input type="checkbox"/> DHS <input type="checkbox"/> other	<input type="checkbox"/> mother <input type="checkbox"/> father <input type="checkbox"/> DHS <input type="checkbox"/> other
Placed with	<input type="checkbox"/> mother <input type="checkbox"/> father <input type="checkbox"/> other	<input type="checkbox"/> mother <input type="checkbox"/> father <input type="checkbox"/> other	<input type="checkbox"/> mother <input type="checkbox"/> father <input type="checkbox"/> other	<input type="checkbox"/> mother <input type="checkbox"/> father <input type="checkbox"/> other

